	Paper No.:
DATE : 5 18 0 8	· · · · · · · · · · · · · · · · · · ·
DATE :	-
SUBJECT : Request for Certificate of Cor	rection on Patent No.: <u>6885118</u>
A response is requested with respect to the	e accompanying request for a certificate of correction.
Please complete this form and return w	ith file, within 7 days to:
Palm location 7580, Certificates of Co	rrection Branch – South Tower – 9A22
	ployee (named below) via PUBSCofC Team in
patent read as shown in the certificate of co	orrecting Office and/or Applicant's errors, should the orrection (COCIN)? No new matter should be introduced, re
should the scope or meaning of the claims be cl	•
	<u>Valerie Jackson</u>
Thank You For Your Assistance	Configuration of Comments in Durant
Thank Tou For Tour Assistance	Certificates of Correction Branch
	Tol No. 702 200 0200 and 44
	Tel. No. 703-308-9390 ext. 114
Note your decision on the appropriate box.	entified correction(s) is hereby:
Note your decision on the appropriate box. Approved	entified correction(s) is hereby: All changes apply
□ Approved □ Approved in Part □ Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
□ Approved □ Approved in Part □ Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision on the appropriate box. ☐ Approved ☐ Approved in Part ☐ Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
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Note your decision on the appropriate box. ☐ Approved ☐ Approved in Part ☐ Denied	All changes apply. Specify below which changes do not apply. State the reasons for denial below.
Note your decision on the appropriate box. Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply. State the reasons for denial below.
☐ Approved in Part	All changes apply. Specify below which changes do not apply. State the reasons for denial below.
Note your decision on the appropriate box. ☐ Approved ☐ Approved in Part ☐ Denied	All changes apply. Specify below which changes do not apply. State the reasons for denial below.